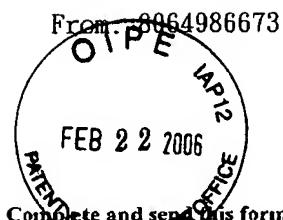
To: Issue Fee

Page: 2/2

Date: 2006/2/22 下午 02:22:42

DATE DUE

04/27/2006



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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PUBLICATION FEE

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327-158000

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027765

APPLN. TYPE

nonprovisional

7590

EXAMINER

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

01/27/2006

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Alex Liang	(Depositor's name
Alter Leans	(Signature
02/22/2006	(Date

TOTAL FEE(S) DUE

\$1700

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/709 373	02/26/2004	Tze-Hsiana Chac	SISP0011USA	2372

ISSUE FEE

\$1400

ART UNIT

2816

TITLE OF INVENTION: MULTI-STAGE DELAY CLOCK GENERATOR

SMALL ENTITY

NO

NGUYEN, LINH M 28	327-158000		
1. Change of correspondence address or indication of "Fee Address" (3 CFR 1.363).	1 Mangan Hen		
Change of correspondence address (or Change of Correspondence	(1) the hattes of up to 3 registred patent attainings		
Address form PTO/SB/122) attached.	(2) the name of a single firm (having us a member a 2		
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED C			
PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is	nce data will appear on the patent. If an assignee is identified below, the document has been filed for NOT a substitute for filing an assignment.		
(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)		
SILICON INTEGRATED SYSTEMS CORP.	NO. 16, CREATION RD. 1, SCIENCE-BASED INDUSTRIAL PARK, HSIN-CHU CITY, TAIWAN, R.O.C.		
Please check the appropriate assignee category or categories (will not b	e printed on the patent): 🚨 Individual 🚨 Corporation or other private group entity 🚨 Governmen		
4a. The following fco(s) are enclosed:	4b. Payment of Fee(s):		
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Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3105 (enclose an extra copy of this form).		
5. Change in Entity Status (from status indicated above)	A** -		
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			
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Authorized Signature Williams Long Long	Date 02/22/2006		
Authorized Signature U.C.L. J.			

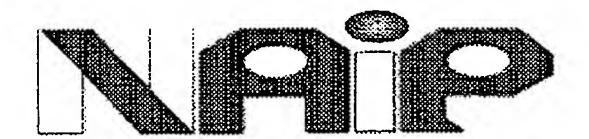
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Voice Mail: 302-729-1562

FAX: 806-498-6673

e-mail:winstonhsu@naipo.com

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Winston Hsu 02/22/2006

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